

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| <b>PATENT APPLICATION FEE DETERMINATION RECORD</b><br>Substitute for Form PTO-875                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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        | Application or Docket Number<br><b>10/706,728</b> | Filing Date<br><b>11/12/2003</b> | <input type="checkbox"/> To be Mailed |                                  |                        |                        |                            |  |  |  |            |            |                                       |              |    |  |              |              |              |              |                                           |          |                                             |                  |                                                                     |                        |           |                        |                        |     |       |                                                                      |     |        |     |          |     |                              |                                                                           |       |      |     |        |     |           |                                  |   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| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left; padding-bottom: 5px;">APPLICATION AS FILED – PART I</th> <th colspan="4" style="text-align: right; padding-bottom: 5px;">OTHER THAN<br/>SMALL ENTITY</th> </tr> <tr> <th style="text-align: center; width: 33.33%;">(Column 1)</th> <th style="text-align: center; width: 33.33%;">(Column 2)</th> <th style="text-align: center; width: 33.33%;">SMALL ENTITY <input type="checkbox"/></th> <th colspan="3" style="text-align: right; border-top: none;">OR</th> <th style="text-align: center; width: 33.33%;">SMALL ENTITY</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">FOR</td> <td style="padding: 5px;">NUMBER FILED</td> <td style="padding: 5px;">NUMBER EXTRA</td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">FEE (\$)</td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">FEE (\$)</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> BASIC FEE<br/>(37 CFR 1.16(a), (b), or (c))</td> <td style="padding: 5px;">N/A</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> SEARCH FEE<br/>(37 CFR 1.16(k), (l), or (m))</td> <td style="padding: 5px;">N/A</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> EXAMINATION FEE<br/>(37 CFR 1.16(o), (p), or (q))</td> <td style="padding: 5px;">N/A</td> </tr> <tr> <td style="padding: 5px;">TOTAL CLAIMS<br/>(37 CFR 1.16(i))</td> <td style="padding: 5px;">minus 20 =</td> <td style="padding: 5px;">*</td> <td style="padding: 5px;">X \$ =</td> </tr> <tr> <td style="padding: 5px;">INDEPENDENT CLAIMS<br/>(37 CFR 1.16(h))</td> <td style="padding: 5px;">minus 3 =</td> <td style="padding: 5px;">*</td> <td style="padding: 5px;">X \$ =</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> APPLICATION SIZE FEE<br/>(37 CFR 1.16(s))</td> <td colspan="3" style="padding: 5px;">If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).</td> <td style="padding: 5px;">TOTAL</td> <td style="padding: 5px;">TOTAL</td> <td style="padding: 5px;">TOTAL</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))</td> <td colspan="3"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> </tbody> </table> <p style="margin-left: 20px;">* If the difference in column 1 is less than zero, enter "0" in column 2.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                               |                                           |                            |                                                   |                                  |                                       | APPLICATION AS FILED – PART I    |                        |                        | OTHER THAN<br>SMALL ENTITY |  |  |  | (Column 1) | (Column 2) | SMALL ENTITY <input type="checkbox"/> | OR           |    |  | SMALL ENTITY | FOR          | NUMBER FILED | NUMBER EXTRA | RATE (\$)                                 | FEE (\$) | RATE (\$)                                   | FEE (\$)         | <input type="checkbox"/> BASIC FEE<br>(37 CFR 1.16(a), (b), or (c)) | N/A                    | N/A       | N/A                    | N/A                    | N/A | N/A   | <input type="checkbox"/> SEARCH FEE<br>(37 CFR 1.16(k), (l), or (m)) | N/A | N/A    | N/A | N/A      | N/A | N/A                          | <input type="checkbox"/> EXAMINATION FEE<br>(37 CFR 1.16(o), (p), or (q)) | N/A   | N/A  | N/A | N/A    | N/A | N/A       | TOTAL CLAIMS<br>(37 CFR 1.16(i)) | minus 20 =                                                     | * | X \$ = | X \$ = | X \$ =                | X \$ = | INDEPENDENT CLAIMS<br>(37 CFR 1.16(h)) | minus 3 = | *                                                                                        | X \$ = | X \$ = | X \$ = | X \$ = | <input type="checkbox"/> APPLICATION SIZE FEE<br>(37 CFR 1.16(s)) | If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |  |  | TOTAL      | TOTAL      | TOTAL      | <input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) |                        |           |                        |           |  |                                           |  |                                             |                  |        |    |        |  |                        |     |       |       |     |        |    |        |  |                              |     |       |      |     |        |    |        |  |                                                                |  |  |  |                       |    |                       |   |                                                                                          |  |  |  |  |  |  |  |  |            |            |            |           |                        |           |                        |
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| <input type="checkbox"/> SEARCH FEE<br>(37 CFR 1.16(k), (l), or (m))                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   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| <input type="checkbox"/> EXAMINATION FEE<br>(37 CFR 1.16(o), (p), or (q))                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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| TOTAL CLAIMS<br>(37 CFR 1.16(i))                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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| INDEPENDENT CLAIMS<br>(37 CFR 1.16(h))                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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| <input type="checkbox"/> APPLICATION SIZE FEE<br>(37 CFR 1.16(s))                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                                           |                            | TOTAL                                             | TOTAL                            | TOTAL                                 |                                  |                        |                        |                            |  |  |  |            |            |                                       |              |    |  |              |              |              |              |                                           |          |                                             |                  |                                                                     |                        |           |                        |                        |     |       |                                                                      |     |        |     |          |     |                              |                                                                           |       |      |     |        |     |           |                                  |                                                                |   |        |        |                       |        |                                        |           |                                                                                          |        |        |        |        |                                                                   |                                                                                                                                                                                                                               |  |  |            |            |            |                                                                            |                        |           |                        |           |  |                                           |  |                                             |                  |        |    |        |  |                        |     |       |       |     |        |    |        |  |                              |     |       |      |     |        |    |        |  |                                                                |  |  |  |                       |    |                       |   |                                                                                          |  |  |  |  |  |  |  |  |            |            |            |           |                        |           |                        |
| <input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left; padding-bottom: 5px;">APPLICATION AS AMENDED – PART II</th> <th colspan="4" style="text-align: right; padding-bottom: 5px;">OTHER THAN<br/>SMALL ENTITY</th> </tr> <tr> <th style="text-align: center; width: 33.33%;">(Column 1)</th> <th style="text-align: center; width: 33.33%;">(Column 2)</th> <th style="text-align: center; width: 33.33%;">(Column 3)</th> <th style="text-align: center; width: 33.33%;">SMALL ENTITY</th> <th colspan="3" style="text-align: right; border-top: none;">OR</th> <th style="text-align: center; width: 33.33%;">SMALL ENTITY</th> </tr> </thead> <tbody> <tr> <td rowspan="6" style="vertical-align: top; padding: 5px;">AMENDMENT</td> <td style="padding: 5px;">09/11/2008</td> <td style="padding: 5px;">CLAIMS<br/>REMAINING<br/>AFTER<br/>AMENDMENT</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">HIGHEST<br/>NUMBER<br/>PREVIOUSLY<br/>PAID FOR</td> <td style="padding: 5px;">PRESENT<br/>EXTRA</td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">ADDITIONAL<br/>FEE (\$)</td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">ADDITIONAL<br/>FEE (\$)</td> </tr> <tr> <td style="padding: 5px;">Total (37 CFR 1.16(i))</td> <td style="padding: 5px;">* 8</td> <td style="padding: 5px;">Minus</td> <td style="padding: 5px;">** 20</td> <td style="padding: 5px;">= 0</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">X \$ 50=</td> <td style="padding: 5px;">0</td> </tr> <tr> <td style="padding: 5px;">Independent (37 CFR 1.16(h))</td> <td style="padding: 5px;">* 2</td> <td style="padding: 5px;">Minus</td> <td style="padding: 5px;">***3</td> <td style="padding: 5px;">= 0</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">X \$ 210=</td> <td style="padding: 5px;">0</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))</td> <td colspan="3"></td> <td style="padding: 5px;">TOTAL<br/>ADD'L<br/>FEE</td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">TOTAL<br/>ADD'L<br/>FEE</td> <td style="padding: 5px;">0</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))</td> <td colspan="3"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"></td> <td style="padding: 5px;">(Column 1)</td> <td style="padding: 5px;">(Column 2)</td> <td style="padding: 5px;">(Column 3)</td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">ADDITIONAL<br/>FEE (\$)</td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">ADDITIONAL<br/>FEE (\$)</td> </tr> <tr> <td rowspan="6" style="vertical-align: top; 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margin-top: 10px;">Legal Instrument Examiner:<br/><b>/DEBRA a. SAVOY/</b></p> |                                                                                                                                                                                                                               |                                           |                            |                                                   |                                  |                                       | APPLICATION AS AMENDED – PART II |                        |                        | OTHER THAN<br>SMALL ENTITY |  |  |  | (Column 1) | (Column 2) | (Column 3)                            | SMALL ENTITY | OR |  |              | SMALL ENTITY | AMENDMENT    | 09/11/2008   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |          | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE (\$)                                                           | ADDITIONAL<br>FEE (\$) | RATE (\$) | ADDITIONAL<br>FEE (\$) | Total (37 CFR 1.16(i)) | * 8 | Minus | ** 20                                                                | = 0 | X \$ = | OR  | X \$ 50= | 0   | Independent (37 CFR 1.16(h)) | * 2                                                                       | Minus | ***3 | = 0 | X \$ = | OR  | X \$ 210= | 0                                | <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s)) |   |        |        | TOTAL<br>ADD'L<br>FEE | OR     | TOTAL<br>ADD'L<br>FEE                  | 0         | <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |        |        |        |        |                                                                   |                                                                                                                                                                                                                               |  |  | (Column 1) | (Column 2) | (Column 3) | RATE (\$)                                                                  | ADDITIONAL<br>FEE (\$) | RATE (\$) | ADDITIONAL<br>FEE (\$) | AMENDMENT |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | X \$ = | OR | X \$ = |  | Total (37 CFR 1.16(i)) | * 8 | Minus | ** 20 | = 0 | X \$ = | OR | X \$ = |  | Independent (37 CFR 1.16(h)) | * 2 | Minus | ***3 | = 0 | X \$ = | OR | X \$ = |  | <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s)) |  |  |  | TOTAL<br>ADD'L<br>FEE | OR | TOTAL<br>ADD'L<br>FEE | 0 | <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |  |  |  |  |  |  |  |  | (Column 1) | (Column 2) | (Column 3) | RATE (\$) | ADDITIONAL<br>FEE (\$) | RATE (\$) | ADDITIONAL<br>FEE (\$) |
| APPLICATION AS AMENDED – PART II                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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        | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR       | PRESENT<br>EXTRA                 | RATE (\$)                             | ADDITIONAL<br>FEE (\$)           | RATE (\$)              | ADDITIONAL<br>FEE (\$) |                            |  |  |  |            |            |                                       |              |    |  |              |              |              |              |                                           |          |                                             |                  |                                                                     |                        |           |                        |                        |     |       |                                                                      |     |        |     |          |     |                              |                                                                           |       |      |     |        |     |           |                                  |   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| AMENDMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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        | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR       | PRESENT<br>EXTRA                 | X \$ =                                | OR                               | X \$ =                 |                        |                            |  |  |  |            |            |                                       |              |    |  |              |              |              |              |                                           |          |                                             |                  |                                                                     |                        |           |                        |                        |     |       |                                                                      |     |        |     |          |     |                              |                                                                           |       |      |     |        |     |           |                                  |   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        | ** 20                                             | = 0                              | X \$ =                                | OR                               | X \$ =                 |                        |                            |  |  |  |            |            |                                       |              |    |  |              |              |              |              |                                           |          |                                             |                  |                                                                     |                        |           |                        |                        |     |       |                                                                      |     |        |     |          |     |                              |                                                                           |       |      |     |        |     |           |                                  |   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        | ***3                                              | = 0                              | X \$ =                                | OR                               | X \$ =                 |                        |                            |  |  |  |            |            |                                       |              |    |  |              |              |              |              |                                           |          |                                             |                  |                                                                     |                        |           |                        |                        |     |       |                                                                      |     |        |     |          |     |                              |                                                                           |       |      |     |        |     |           |                                  |   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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))                                                                                                                                                                |                                           |                            |                                                   | TOTAL<br>ADD'L<br>FEE            | OR                                    | TOTAL<br>ADD'L<br>FEE            | 0                      |                        |                            |  |  |  |            |            |                                       |              |    |  |              |              |              |              |                                           |          |                                             |                  |                                                                     |                        |           |                        |                        |     |       |                                                                      |     |        |     |          |     |                              |                                                                           |       |      |     |        |     |           |                                  |   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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))                                                                                                                                      |                                           |                            |                                                   |                                  |                                       |                                  |                        |                        |                            |  |  |  |            |            |                                       |              |    |  |              |              |              |              |                                           |          |                                             |                  |                                                                     |                        |           |                        |                        |     |       |                                                                      |     |        |     |          |     |                              |                                                                           |       |      |     |        |     |           |                                  |   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This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**  
If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.